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## TRANSMITTAL FORM

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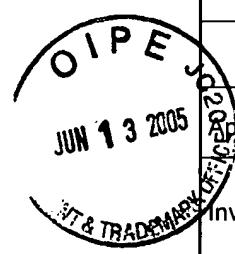
		Application Number	10/620,351-Conf. #8926
		Filing Date	July 17, 2003
		First Named Inventor	Masaki Katch
		Art Unit	2655
		Examiner Name	G. Patel
Total Number of Pages in This Submission	23	Attorney Docket Number	R2184.0097-B

### ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
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<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
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### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	DICKSTEIN SHAPIRO MORIN & OSHINSKY LLP		
Signature			
Printed name	Mark J. Thronson		
Date	June 2, 2005	Reg. No.	33,082



<b>AMENDMENT TRANSMITTAL LETTER</b>				Docket No. R2184.0097-B	
Application No. 10/620,351-Conf. #8926		Filing Date July 17, 2003		Examiner G. Patel	
Applicant(s): Masaki Katoh et al.					
Invention: OPTICAL INFORMATION RECORDING MEDIUM, WITH AT LEAST ONE INCONSECUTIVE PART, AND RECORDING APPARATUS					
<b>TO THE COMMISSIONER FOR PATENTS</b>					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present		Rate
Total Claims	7	- 20 =		x	
Independent Claims	3	- 3 =		x	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify):					
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b> 0.00					
<input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity <input type="checkbox"/> No additional fee is required for this amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed. <input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>04-1073</u> as described below. A duplicate copy of this sheet is enclosed. <input checked="" type="checkbox"/> Credit any overpayment. <input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
Dated: <u>June 13, 2005</u>					
<u>Mark J. Thronson</u> Attorney Reg. No.: 33,082 DICKSTEIN SHAPIRO MORIN & OSHINSKY LLP 2101 L Street NW Washington, DC 20037-1526 (202) 775-4742					